

INVENTORSHIP IDENTIFICATION

As a below named inventor, I hereby declare that my residence, mailing address and citizenship are as stated below, next to my name. I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter that is claimed, and for which a patent is sought on the invention entitled:

CABL	CABLE FEED BUSHING AND METHOD OF INSTALLING A CABLE THROUGH A WALL OR OTHER STRUCTURE				
		TITLE OF INVENTION			
		SPECIFICATION IDENTIFICATION			
the sp	ecificatio	n of which:			
(a)	\boxtimes	is attached hereto.			
(b)		was filed on, as Serial No			
		and was amended on _ (if applicable).			
(c)		was described and claimed in PCT International Application No filed on			
		and was amended on (if applicable).			
	٠	ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR			
	l here	by state that I have reviewed and understand the contents of the above-identified specification,			
includ	ling the d	claims as amended by any amendment referred to above.			
	l ackr	nowledge the duty to disclose information, which is material to patentability as defined in 37,			

PRIORITY CLAIMS UNDER 35 U.S.C. § 119(a)-(d)

(Prior Foreign/Pct Application(S) Filed Within 12 Months (6 Months For Design) Prior To This Application)

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate(s) or 365(a) of any PCT international application(s) which designated at least one country other than the United States of America, listed below and have also identified below any foreign application(s) for patent or inventor's certificate(s) or any PCT international application(s) having a filing date before that of the application(s) of which priority is claimed.

Application Number	Country or PCT	Date Of Filing	Priority not	Certified Copy
		(Day, Month, Year)	Claimed	Attached?
				☐ YESNO ☐

Code of Federal Regulations, § 1.56.



CLAIM FOR BENEFIT OF PRIOR U.S. PROVISIONAL APPLICATION(S) UNDER 35 U.S.C. § 119(e)

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

Provisional Application Number	Filing Date	

CLAIM FOR BENEFIT OF EARLIER US/PCT APPLICATION(S) UNDER 35 U.S.C. 120

(All Foreign Application(S), *If Any*, Filed More Than 12 Months (6 Months For Design) Prior To This U.S. Application)

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) or 365(c) PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application(s) in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56, which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application.

U.S Parent	PCT Parent	Date Of Filing	Parent Patent
Application No.	Application No.	(Day, Month, Year)	No. (If applicable)
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DECLARATION

I hereby declare that my presentation of this paper constitutes a certification under 37 C.F.R § 10.18, which provides, in part, that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and that further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful statements may jeopardize the validity of the application and any patent issuing therefrom.

DOMOVES DICE



SIGNATURE(S)

Inventor(s)					
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Inventor's signature					
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(GIVEN NAME)	(MIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)		
Inventor's signature					
Date		Country of Citizenship			
Residence					
Mailing Address:					
	Signature by administrator(trix), or legal representative for deceased or incapacitated				
inv	nventor. Number of pages added				
☐ Siç	Signature for inventor who refuses to sign or cannot be reached by person authorized under				
37	37 CFR 1.47. Number of pages added				
☐ Ad	ded page for signature by one joint inv	rentor on behalf of deceased inventor(s) w	here legal		
rep	sentative cannot be appointed in time. (37 CFR 1.47) Number of pages added				

Authorization of attorney(s) to accept and follow instructions from representative.

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This declaration ends with this page.